



ATTORNEY DOCKET NO. 01942-00008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	//	100
Eija Pirhonen, Jan Nieuwenhuis,)	Examiner: Carlos A	. Azpuru
Auvo Kaikkonen, Tuomo Nieminen, and Franz Weber)	Art Unit: 1615	Bet
Serial No.: 10/006,800)		8-12-03
Filed: December 4, 2001)		
Title: RESORBABLE POLYMER COMPOSITIO IMPLANT AND METHOD OF MAKING IMPLANT)))		

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

This is in response to the Office Action dated May 7, 2003 (Paper No. 5). Kindly reconsider the application in view of the following amendments and remarks.

Please amend the claims in accordance with the "Claim Listing" which begins at page 2 of this paper.

08/07/2003 SSESHE1 00000026 190733 10006800



AUG 1,1,2003

PRYTENT: ATTORNEY DOCKET NO. 01942-00008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appli	cation of:)		
Auv	Pirhonen, Jan Nieuwenhuis, o Kaikkonen, Tuomo Nieminen, and nz Weber))	Examiner	: Carlos A. Azpuru
Serial No.:	10/006,800)	Art Unit:	1615
Filed:	December 4, 2001)		1013
IMI	SORBABLE POLYMER COMPOSITION PLANT AND METHOD OF MAKING PLANT)))	-	

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

In regard to the above identified application, we are transmitting herewith the attached:

- 1. Amendment and Response to Office Action, and
- 2. Return postcard.

With respect to additional fees:

- ____ A. No additional fee is required.
- X B. An additional fee is required and has been calculated as shown below:

USSN 10/006,800 Express Mail Receipt: EV 323344285 US

EV323344285US

a

					•=011.5	N I I I I I I
CLAIMS AS A	WENDED				LUIT LE	VILIT :
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	20	Minus	20	0	X \$9	= \$0.00
Indep. Claims	10	Minus	4	6	X \$42	= \$252.00
		l	Total Additiona	al Claims Fees		\$252.00
Petition/Request for Extension of Time		_0 months		\$0.00		
		Total Additional Amendment	al Fees for this		\$252.00	

* If the entry in	Column 2 is	less than the er	ntry in Column 4	, write "0"	in Column 5.
-------------------	-------------	------------------	------------------	-------------	--------------

*** Each multiple dependent claim :	should be counted as the number	r of claims from which it depends.
-------------------------------------	---------------------------------	------------------------------------

	C.	Attached is a check in the amount of \$
<u>X</u>	D.	The Commissioner is hereby authorized to charge the total additional fee of \$252.00 to our Deposit Account No. 19-0733. A duplicate copy of this sheet is enclosed.
	E.	The Commissioner is hereby authorized to charge the Petition fee of \$ to Deposit Account No. 19-0733.

The Commissioner is hereby authorized to charge any additional fees or credit overpayment to Deposit Account No. 19-0733.

Respectfully submitted,

John P. Iwanicki, Reg. No. 34,628 BANNER & WITCOFF, LTD. 28 State Street, 28th Floor

Boston, MA 02109

(617) 720-9600

USSN 10/006,800 Express Mail Receipt: EV 323344285 US

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.